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IN THE UNITED STATES DISTRICT COURT

FOR THE MIDDLE DISTRICT OF ALABAM FOR P. HACKETT, CLK
U.S. DISTRICT COURT
MIDDLE DISTRICT ALA

APPLICATION TO PROCEED IN FORMA PAUPERIS

	Declaring that the personal and financial information I have given below	is true and corr	ect, I apply to
this	Court for authority to proceed with this case without prepayment of fees, of	costs, or security	
1.	Your full name: LABRIE HODE#18/3/5-L-5-/A		·
	Present mailing address: P.O. BOX 150		
	MT. MEIGS AlABAMA	36057	
2.	Are you presently employed?	Yes	No V
	If the answer is "yes," give the name and address of your employer and the	amount of your	usual monthly
sala	ry or wages.		
	X /		
	/4		
	If the answer is "no," give the name and address of your last employer, bunt of the monthly salary or wages you were receiving.	when you last w	orked, and the
	\mathcal{U}		
	A		
	e last worked: N/A		
	athly earnings: /////		
3.	Have you received within the past twelve months any money from any o	of the following	sources?
	(a) Business, profession, or any form of self-employment?	Yes	No
	(b) Interest, dividends, rents, or investment income of any kind?	Yes	No

	(c)	Pensions, annuities, or life insuran	ce payments?	Yes	No V
	(d)	Gifts or inheritances?		Yes	No V
	(e)	Any other sources?		Yes	No V
If the	answei	r to any of the above is "yes," descri	be each source of mone	y and state the amour	it received from
each	during	the past twelve months.		•	
4.	How	much money do you own or have in	any checking or saving a	accounts, including yo	our prison or jail
accol	unt? \$ _	on the state of th			
5.	Do y	you own any real estate, stocks, be	onds, notes, automobile	es, boats, or other ve	iluable property
(excl	uding o	rdinary household items and clothing	g)?	Yes	No L
If the	answe	r is "yes," describe the property and	state its approximate va	lue:	
	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
					
6	T ist	the nersons who are dependent uno	n von for support stati	ng vour relationship t	a them and have
6.		the persons who are dependent upo	in you for support, state	ing your relationship to	o mem and how
much	ı you co	ontribute toward their support.	NOWE		
			NOWE		

			MARA B. S	· · · · · · · · · · · · · · · · · · ·	
	I de	clare (or certify, verify, or state)	under penalty of per	jury that the forego	ing is true and
corr	ect.				
Date	d Di	ARCh 6th 2007	Lanie 2	Lope !	
***************************************	<u>214</u>		SIGNATURE OF	PLAINTIFF	

I hereby certify that prisoner

institution since

Month 5

Month 6

Current month

(if less than full month)

has been incarcerated in this

_ in his prison or jail

INFORMATION REGARDING PRISONER ACCOUNTS

The Prison Litigation Reform Act, Pub. L. No. 104-134, §804, requires a prisoner seeking to proceed in forma pauperis to submit information regarding his prison or jail trust account for the six months preceding the filing of the complaint. This information must be obtained from the appropriate official of each prison or institution at which the prisoner is or was confined within the past six months. This information must be certified by prison or jail personnel and must include both the total deposits made to the prisoner's account each and every month for the preceding six months and the average monthly balance in the account each and every month during the preceding six months. Information for six full months must be provided.

provided below is	true and correct.	ICI JP OS I furth	er certify that the information
	Month/Year	Total Deposits Received	Average Account Balance
Month 1	Sept.07	s 0.00	s 4.64
Month 2	<u>Oct 07</u>	s 20.00	s 3,55
Month 3	NOV 07	s 25.00	s 2.87
Month 4	Dec o7	\$ 15.00	s 2.15

2 and that he has the sum of \$

ignature of Authorized Officer of Institution

Name of Institution

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